

National Healthcare Safety Network (NHSN)

Long-term Care Facility (LTCF) Component

Prevention Process Measures Module:

**Hand Hygiene Event Reporting
Gown/Glove Use Event Reporting**



Target Audience

- ❑ **This training is designed for those who will collect, report, or analyze prevention process measures data in NHSN, and may include:**
 - NHSN Facility Administrator
 - LTCF Component Primary Contact
 - LTCF Administrator
 - Director of Nursing
 - Infection Prevention and Control Staff
 - Professional Nursing Staff
 - Trained Support Staff



You should have viewed the Overview of the LTCF Component slides prior to beginning this training

Objectives

- ❑ Describe the rationale for monitoring prevention process measures in NHSN
- ❑ Describe the methodology, process, and definitions used in monitoring hand hygiene (HH) events and gown and gloves use (GG) events



Documents and Forms

- ❑ **The following documents and forms will be discussed in this training. You may wish to PRINT these to follow along.**
- 1) Prevention Process Measures Protocol**
- 2) Table of Instructions for the Prevention Processes Monthly Monitoring Form**
- 3) Prevention Processes Monthly Monitoring for LTCF Form**
- 4) Monthly Reporting Plan for LTCF**

<http://www.cdc.gov/nhsn/ltc/proc-measure/>

Background

- ❑ **Why monitor adherence to prevention process measures in LTCF?**
 - Hands of healthcare personnel (HCP) are easily contaminated during care-giving or from contact with surfaces in close proximity to a resident and can transmit healthcare-associated infections (HAIs) from one resident to another
 - HH is one of the most effective ways to prevent transmission of HAIs
 - Gown and gloves use by HCP when residents are placed in Transmission-based Contact Precautions have been shown to reduce rates of HAI transmission
 - Reinforces and supports the CDC and HICPAC approved guidelines for prevention HAI and informs infection control staff of the impact of performance improvement efforts

<http://www.cdc.gov/hicpac/pubs.html>

Purpose of Prevention Process Measure Event Reporting

- ❑ To calculate rates of adherence to HH and/or GG use opportunities among all healthcare personnel (HCP) in a facility**
- ❑ To provide feedback to HCP on adherence to HH and/or GG use**
- ❑ To assess the impact of efforts to improve HH and/or GG use practices by HCP over time**

Settings for Prevention Process Measure Reporting

□ Reporting is available for the following facility types:

- Certified skilled nursing facilities/nursing homes (LTC:SKILLNURS)
- Intermediate/chronic care facilities for the developmentally disabled (LTC:DEVDIS)
- Assisted living facilities and residential care facilities (LTC:ASSIST)

Reporting Requirements

- ❑ Facilities must indicate HH and/or GG use surveillance in the *Monthly Reporting Plan for LTCF*
- ❑ Surveillance must be reported for at least 6 consecutive months to provide meaningful measures
 - HH surveillance should be performed facility-wide and include all types of HCP
 - GG use surveillance should be performed facility-wide for all HCP caring for residents placed in Transmission-based Contact precautions

Monthly Reporting Plan for LTCF



Department of Health and Human Services
Centers for Disease Control and Prevention

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Alerts

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Resident

Event

Summary Data

Surveys

Users

Facility

Group

Log Out

Logged into Stone and Thompson Quality Care Facility (ID 11131) as NIMALIE.
Facility Stone and Thompson Quality Care Facility (ID 11131) is following the LTCF component.

Add Monthly Reporting Plan

[Print PDF Form](#)

Mandatory fields marked with *

Facility ID*:

Month*:

Year*:

☐ No Long Term Care Facility Component Modules Followed this Month

HAI Module [HELP](#)

	Locations	UTI
	<input type="text" value="FACWIDEIN - FacWideIN"/>	<input type="checkbox"/>

LabID Event Module [HELP](#)

	Locations	Specific Organism Type	Lab ID Event All Specimens
	<input type="text" value="FACWIDEIN - FacWideIN"/>	<input type="text" value="CDIF - C. difficile"/>	<input checked="" type="checkbox"/>
	<input type="text" value="FACWIDEIN - FacWideIN"/>	<input type="text" value="MRSA - MRSA"/>	<input checked="" type="checkbox"/>

Prevention Process Measure Module [HELP](#)

	Locations	Hand Hygiene	Gown and Gloves Use
	<input type="text" value="FACWIDEIN - FacWideIN"/>	<input type="checkbox"/>	<input type="checkbox"/>

Required Forms

❑ Prevention Process Measures Monthly Monitoring Form

❑ Hand Hygiene

- Numerator = Number of hand hygiene opportunities performed
- Denominator = Total hand hygiene observations indicated

❑ Gown and Glove Use

- Numerator – Number of contacts for which gown/gloves were correctly used
- Denominator – Total number of contacts for which gown/gloves use was indicated

Prevention Process Measures Monthly Monitoring Form



OMB No. 0920-0666
Exp. Date: 01-31-2015
www.cdc.gov/nhsn

Prevention Process Measures Monthly Monitoring for LTCF



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*required for saving

**conditionally required based up on monitoring selection in Monthly Reporting Plan

Facility ID #: _____ *Month: _____ *Year: _____ *Location Code: _____

Prevention Process Measures

Hand Hygiene

**Performed: _____

**Indicated: _____

Gown and Gloves

**Used: _____

**Indicated: _____

See Table of Instructions: http://www.cdc.gov/nhsn/PDFs/LTC/forms/57.141-TOI-Monthly-Reporting-Plan-LTCF_FINAL.pdf

Prevention Process Measures Module:

HAND HYGIENE REPORTING



Hand Hygiene Definitions



❑ Antiseptic Handwash

- Washing hands with water and soap or other detergents containing an antiseptic agent

❑ Antiseptic Hand Rub

- Applying antiseptic hand-rub product to all surfaces of the hands to reduce the number of organisms present

❑ Hand Hygiene

- Handwashing, antiseptic handwash, antiseptic hand rub, or surgical hand antisepsis

❑ Handwashing

- Washing hands with water and plain (i.e. non-antimicrobial) soap



Hand Hygiene Event Monitoring Process

- ❑ **Numerator: Hand hygiene performed** = Total number of observed contacts during which HCP touched either the resident or inanimate objects in the immediate vicinity of the resident and appropriate hand hygiene was performed
- ❑ **Denominator: Hand hygiene indicated** = Total number of observed contacts during which HCP touched either the resident or inanimate objects in the immediate vicinity of the resident and therefore, appropriate hand hygiene was indicated

Perform at least 30 unannounced observations of HCPs of varied occupation types after contact with a resident or inanimate objects in resident's vicinity each month



Hand Hygiene Data Collection

- ❑ **Adherence is monitored by direct observation of HCP practices in resident care areas throughout the facility**
 - LTCF staff other than an infection preventionist can be trained to perform the observations and collect required data elements



Hand Hygiene Data Analysis

□ Hand Hygiene Percent Adherence

= (Number of contacts for which hand hygiene was *performed* / Number of contacts for which hand hygiene was *indicated*) x 100

- Data stratified by time (e.g. month, quarter, etc.)

Prevention Process Measures Module:

GOWN AND GLOVES USE



Gown & Gloves Use Definition

- ❑ **Monitor Gown and Gloves Use by HCP during interactions with residents who are placed in Transmission-based Contact Precautions**
- ❑ **Appropriate gown and gloves use:**
 - Donning of both a gown and gloves *prior* to contact with a resident or inanimate surfaces/objects in vicinity of resident
 - Use of gloves only without a gown would not count as appropriate use when the resident is placed in Contact Precautions





Gown & Gloves Use Event Monitoring Process

- ❑ **Numerator: Gown and gloves used** = Total number of observed contacts between a HCP and a resident or objects/surfaces within the resident's room for which gown and gloves were donned prior to the contact
- ❑ **Denominator: Gown and gloves indicated** = Total number of observed contacts between a HCP and a resident or objects/surfaces within the resident's room for which gown and gloves were indicated.
- ❑ Perform at least 30 unannounced observations of HCP during their interactions with residents who are placed in Transmission-based Contact Precautions each month



Prevention Process Measures: Gown and Gloves Use Data Collection

- ❑ **Adherence is monitored by direct observation of HCP practices in resident care areas throughout the facility**
 - LTCF staff other than an infection preventionist can be trained to perform the observations and collect required data elements



Gown and Gloves Use Data Analysis

□ Gown and Glove Use Percent Adherence

= (Number of contacts for which gown and gloves were used / Number of contacts for which gown and gloves were indicated) x 100

- Data stratified by time (e.g. month, quarter, etc.)

Custom Fields

- Additional data entry fields which users can name (labels) and capture text or numeric data
- User can customize or expand data collected and submitted at your facility using these optional fields



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Prevention Process Measures Monthly Monitoring for LTCF



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**conditionally required based upon monitoring selection in Monthly Reporting Plan

Facility ID #: _____ *Month: _____ *Year: _____ *Location Code: _____

Custom Fields

Label					
Data	_____	_____	_____	_____	_____

Let's Review!



- ❑ **You can perform monitoring of hand hygiene, or gown and gloves use, or both**
- ❑ **To get the most from your data:**
 - Minimum reporting is six months during a calendar year
 - Monitoring should include all types of healthcare personnel throughout the entire facility
 - Try to record and enter minimum of 30 observations per month for each event

NHSN Resources

- ❑ **NHSN Home Page**

- <http://www.cdc.gov/nhsn/>

- ❑ **NHSN LTCF Component**

- <http://www.cdc.gov/nhsn/ltc/>

- ❑ **LTCF Component Prevention Process Measures Module**

- <http://www.cdc.gov/nhsn/ltc/proc-measure/>